



328278

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REGION 6  
1445 ROSS AVENUE, SUITE 1200  
DALLAS, TX 75202-2733

May 17, 2002

TEXTILE PROCESSING PRODUCTS  
5169 EL PASO DRIVE  
EL PASO, TX 79905  
ATTN: WILLIAM TSE, VICE PRESIDENT

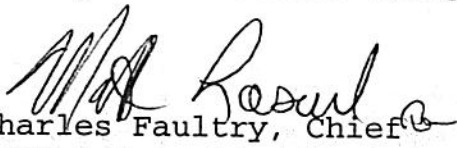
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This is to acknowledge that, in compliance with Section 3010 of the Resource Conservation and Recovery Act (RCRA), you have filed a Notification of Regulated Waste Activity for:

**TEXTILE PROCESSING PRODUCTS  
5169 EL PASO DRIVE  
EL PASO, TX 79905**

Your EPA Identification Number for this installation is:  
**TXR000048330**

The EPA Identification Number must be included in all shipping manifests for transporting hazardous wastes; on all Biennial Reports that generators of hazardous wastes, and owners and operators of hazardous waste treatment, storage, and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste reports and documents required under Subtitle C of RCRA. A Subsequent Notification of Regulated Waste Activity is required should any information on the original document change.

  
Charles Faultry, Chief  
RCRA Information Management Section



Please refer to Section V. Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



# Notification of Regulated Waste Activity

United States Environmental Protection Agency

MAR 22 2002

RECEIVED

Date Received  
(For Official Use Only)

APR 15 2002

6PD-I

## I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. Initial Notification

B. Subsequent Notification  
(Complete item C)

C. Installation's EPA ID Number

TXR000048330

## II. Name of Installation (Include company and specific site name)

TEXTILE PROCESSING PRODUCTS

## III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

5169 EL PASO DRIVE

Street (Continued)

City or Town

EL PASO

State

TX

Zip Code

79905-

County Code

County Name

141 EL PASO

## IV. Installation Mailing Address (See instructions)

Street or P.O. Box

5169 EL PASO DRIVE

City or Town

EL PASO

State

TX

Zip Code

79905-

## V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

TSE

(First)

WILLIAM

Job Title

VICE PRESIDENT

Phone Number (Area Code and Number)

703-628-4282

## VI. Installation Contact Address (See instructions)

A. Contact Address  
Location Mailing

B. Street or P.O. Box

2355 NEBRASKA AVE NW

City or Town

WASHINGTON

State

DC

Zip Code

20016-

## VII. Ownership (See instructions)

## A. Name of Installation's Legal Owner

CHEN MAY TSE

Street, P.O. Box, or Route Number

11354 WEST SAN RAPHAEL DRIVE

City or Town

SAN DIEGO

State

CA

Zip Code

92130-

Phone Number (Area Code and Number)

858-794-2695

B. Land Type

P

C. Owner Type

P

D. Change of Owner  
Indicator

Yes

X

No

Date Changed  
Month Day Year

Month

Day

Year

BP  
4/15/02

4-18-02

Tm 11.00 PM 4.0



MAR 22 2002

ID - For Official Use Only

## VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. See Instructions)

## A. Hazardous Waste Activities

1. Generator (See Instructions)  
☒ a. Greater than 1000kg/mo (2,200 lbs.)  
☐ b. 100 to 1000 kg/mo (220-2,200 lbs.)  
☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)  
☐ a. For own waste only  
☐ b. For commercial purposes
- Mode of Transportation  
☐ 1. Air  
☐ 2. Rail  
☒ 3. Highway  
☐ 4. Water  
☐ 5. Other - specify \_\_\_\_\_
- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see instructions.
- ☐ 4. Exempt Boiler and/or Industrial Furnace  
☐ a. Smelting, Melting, and Refining Furnace Exemption  
☐ b. Small Quantity On-Site Burner Exemption
- ☐ 5. Underground Injection Control

## C. Used Oil Management Activities

1. Used Oil Transporter/Transfer Facility - Indicate Type(s) of Activity(ies)  
☐ a. Transporter  
☐ b. Transfer Facility
2. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)  
☐ a. Processor  
☐ b. Re-refiner
- ☐ 3. Off-Specification Used Oil Burner
4. Used Oil Fuel Marketer  
☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Used Oil Burner  
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

## B. Universal Waste Activity

- ☐ Large Quantity Handler of Universal Waste

## IX. Description of Hazardous Wastes (Use additional sheets if necessary)

## A. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1 D001	2 D002	3 F001	4	5	6
7	8	9	10	11	12

## B. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24; See instructions if you need to list more than 4 toxicity characteristic waste codes.)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☒ 3. Reactive (D003) ☐ 4. Toxicity Characteristic ☒

(List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s))

1 F001	2	3	4
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## C. Other Wastes. (State-regulated or other wastes requiring a handler to have an I.D. number; See instructions.)

1	2	3	4	5	6
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## X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Name and Official Title (Type or print)

WILLIAM BE VICE PRESIDENT

Date Signed

3/18/02

## XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section IV of the booklet for addresses.)